## PART B - FEE(S) TRANSMITTAL Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE BOOS & O MAL Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571) 273-2885 or <u>Fax</u> INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 09/28/2005 7590 Benjamin Aaron Adler Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. **ADLER & ASSOCIATES** 8011 Candle Lane 01/04/2006 KBETEMA2 00000072 10809757 Houston, TX 77071 YESMIN (Depositor's name) 700.00 OP 300.00 OP 01 FC:2501 (Signature 02 FC:1504 30.00 OF 03 FC:8001 28 (Date) 0 CONFIRMATION NO. FIRST NAMED INVENTOR ATTORNEY DOCKET NO. APPLICATION NO. FILING DATE D6502 03/25/2004 Charles R. Yates 10/809,757 TITLE OF INVENTION: REAL-TIME POLYMERASE CHAIN REACTION-BASED GENOTYPING ASSAY FOR SINGLE NUCLEOTIDE POLYMORPHISM TOTAL FEE(S) DUE DATE DUE ISSUE FEE **PUBLICATION FEE** SMALL ENTITY APPLN. TYPE 12/28/2005 \$300 \$1000 YES \$700 nonprovisional ART UNIT **CLASS-SUBCLASS EXAMINER** SWITZER, JULIET CAROLINE 1634 435-006000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list IBENJAMIN AARON ADLER (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE THE UNIVERSITY OF TENNESSEE KNOXVILLE, TENNESSEE RESEARCH FOUNDATION

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